

North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities and Substance Abuse Services

3001 Mail Service Center • Raleigh, North Carolina 27699-3001 Tel 919-733-7011 • Fax 919-508-0951

Beverly Eaves Perdue, Governor Lanier M. Cansler, Secretary

Leza Wainwright, Director

July 12, 2010

MEMORANDUM

TO: LME Directors

FROM: Leza Wainwright

SUBJECT: The Frequency and Extent of Monitoring Tool and Provider Performance Reports (FEM)

The requirement for the Frequency and Extent of Monitoring Tool (FEM) to be completed on all provider agencies in the LME's catchment area at least every three years has been changed. **The new requirement is that the FEM be completed or updated at least annually.** Note that the FEM may need to be updated more often (e.g., following monitoring by the LME, when any significant changes occur, or at the request of the provider) to reflect the provider's **current** status.

This change is being made to ensure that timely information is available for the Provider Performance Reports that the Division is developing. (See Implementation Update #73 for details on plans for the Provider Performance Reports). Since FEM scores will be included in the Provider Performance Reports, it is crucial that the FEM reflects the provider's current status. The Division will begin piloting Provider Performance Reports in October 2010, starting with providers approved as Critical Access Behavioral Health Agencies (CABHA) with a mental health service continuum. To ensure that timely and complete information is available for this pilot, we are requesting that each LME review and update the FEM by August 15, 2010 for each agency approved to become a CABHA provider. In the future, if a FEM has not been done within one year of CABHA certification, the LME needs to update the FEM within six weeks of the provider's certification. Updated FEM scores should be sent to Provider.Monitoring@dhhs.nc.gov

In order to facilitate completing and updating the FEM on a more frequent basis, the Division is currently exploring mechanisms for providing relevant information to LMEs from monitoring/oversight activities conducted by the accrediting bodies, DHSR, DMH/DD/SAS, and DMA. While these mechanisms may not be in place by August 31st, the Division expects that having this information available on a regular basis in the future will assist LMEs in more efficiently completing and updating the FEM as needed.

The FEM will no longer include DSS oversight information. Feedback from LMEs has been that this information has been difficult to obtain. Further review by DMH/DD/SAS revealed substantiations of neglect in facilities licensed by DSS are extremely rare.



Based on preliminary feedback from providers, LMEs and consumers, Provider Performance Reports are being designed to be specific to the age/disability group served by the provider. The FEM will continue to be administered per agency in the LME catchment area and the FEM score for the agency will be used in the Provider Performance Reports.

cc: LME Provider Relations Staff
LME Quality Management Staff
DMH/DD/SAS Executive Leadership Team
DMH/DD/SAS Staff

